UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

CHAPTER 13 STANDING TRUSTEE FINAL REPORT AND ACCOUNT

Tom Vaughn, Chapter 13 Trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 04/07/2004.
- 2) The case was confirmed on 06/03/2004.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on 06/04/2004, 08/24/2004.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
 - 5) The case was completed on 10/02/2008.
 - 6) Number of months from filing to the last payment: 54
 - 7) Number of months case was pending: 60
 - 8) Total value of assets abandoned by court order: NA
 - 9) Total value of assets exempted: \$ 12,275.00
 - 10) Amount of unsecured claims discharged without payment \$ 19,216.87
 - 11) All checks distributed by the trustee to this case have cleared the bank.

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Total paid by or on behalf of the debtor Less amount refunded to debtor NET RECEIPTS	\$ 21,948.00 \$ 12.25 \$ 21,935.75
Expenses of Administration:	
Expenses of Administration: Attorney's Fees Paid through the Plan	\$ 1,994.00
	\$ 1,994.00 \$.00
Attorney's Fees Paid through the Plan	

\$ 706.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. <u>Paid</u>
PREMIUM MARKETING SY	UNSECURED	50.00	.00	722.10	72.21	.00
CHASE HOME FINANCE L	SECURED	67,000.00	.00	.00	.00	.00
CHASE HOME FINANCE L	SECURED	4,000.00	.00	5,470.29	5,470.29	.00
TRIAD FINANCIAL	SECURED	7,500.00	.00	9,140.00	9,140.00	1,510.71
TRIAD FINANCIAL	UNSECURED	7,700.00	.00	1,141.05	114.11	.00
EXCEL LLC ST JAMES	UNSECURED	35.00	NA	NA	.00	.00
ASSET ACCEPTANCE LLC	UNSECURED	2,500.00	.00	2,456.85	245.69	.00
ASSET ACCEPTANCE COR	UNSECURED	NA	.00	2,331.55	233.16	.00
CAPITAL ONE BANK	UNSECURED	1,300.00	.00	1,243.47	124.35	.00
CAPITAL ONE	OTHER	.00	NA	NA	.00	.00
CAPITAL ONE BANK	OTHER	.00	NA	NA	.00	.00
CHRIST MEDICAL CENTE	OTHER	.00	NA	NA	.00	.00
CHRIST HOSPITAL	UNSECURED	300.00	NA	NA	.00	.00
CHRIST HOSPITAL	OTHER	.00	NA	NA	.00	.00
RESURGENT ACQUISITIO	UNSECURED	800.00	.00	762.06	76.21	.00
I C SYSTEMS INC	OTHER	.00	NA	NA	.00	.00
CITY OF CHICAGO PARK	UNSECURED	60.00	.00	100.00	10.00	.00
LINEGARGER GOGGAN BL	OTHER	.00	NA	NA	.00	.00
COLUMBIA HOUSE	UNSECURED	100.00	NA	NA	.00	.00
COLUMBIA HOUSE	OTHER	.00	NA	NA	.00	.00
COLUMBIA HOUSE	OTHER	.00	NA	NA	.00	.00
COMMONWEALTH EDISON	UNSECURED	500.00	NA	NA	.00	.00
COOK COUNTY HOSPITAL	UNSECURED	2,000.00	NA	NA	.00	.00

Attorney fees paid and disclosed by debtor

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal <u>Paid</u>	Int. Paid
GUILLERMO PHILLIPS M	UNSECURED	20.00	NA	NA	.00	.00
EMERGENCY HEALTHCARE	UNSECURED	75.00	NA	NA	.00	.00
NCO FINANCIAL SYSTEM	OTHER	.00	NA	NA	.00	.00
HEALTH SOUTH	UNSECURED	200.00	NA	NA	.00	.00
NICOR GAS	UNSECURED	650.00	.00	679.20	67.92	.00
OAK FOREST HOSPITAL	UNSECURED	130.00	NA	NA	.00	.00
OAKLAWN RADIOLOGIST	UNSECURED	1,450.00	NA	NA	.00	.00
OAK LAWN RADIOLOGIST	OTHER	.00	NA	NA	.00	.00
OXMOOR HOUSE	UNSECURED	25.00	NA	NA	.00	.00
PARK FOREST FIRE DEP	UNSECURED	335.00	NA	NA	.00	.00
PARKVIEW ORTHOPAEDIC	UNSECURED	110.00	NA	NA	.00	.00
PREMIUM MARKETING SY	UNSECURED	NA	NA	NA	.00	.00
PRITI SINGH MD	UNSECURED	125.00	.00	151.76	15.18	.00
PROVIDIAN VISA CARD	UNSECURED	850.00	NA	NA	.00	.00
PROVIDIAN NATIONAL B	OTHER	.00	NA	NA	.00	.00
QUEST DIAGNOSTICS	UNSECURED	75.00	NA	NA	.00	.00
QUEST DIAGNOSTICS IN	OTHER	.00	NA	NA	.00	.00
PORTFOLIO RECOVERY A	UNSECURED	2,500.00	.00	2,431.00	243.10	.00
SEARS	OTHER	.00	NA	NA	.00	.00
SEARS	OTHER	.00	NA	NA	.00	.00
SOUTH SUBURBAN HOSPI	UNSECURED	115.00	NA	NA	.00	.00
SOUTH SUBURBAN HOSPI	OTHER	.00	NA	NA	.00	.00
ST JAMES HOSPITAL	UNSECURED	6,555.00	.00	1,916.40	191.64	.00
ST JAMES HOSPITAL &	OTHER	.00	NA	, NA	.00	.00
ST JAMES HOSPITAL	OTHER	.00	NA	NA	.00	.00
UNIVERSITY OF CHICAG	UNSECURED	130.00	NA	NA	.00	.00
VILLAGE OF PARK FORE	UNSECURED	250.00	.00	250.00	25.00	.00
CHASE HOME FINANCE L	SECURED	NA	.00	700.00	700.00	.00
CHASE HOME FINANCE L	SECURED	NA	.00	450.00	450.00	.00

Summary of Disbursements to Creditors:		=======	•
 	Claim Allowed	Principal Paid	Int. Paid
Secured Payments:			
Mortgage Ongoing	.00	.00	.00
Mortgage Arrearage	5,470.29	5,470.29	.00
Debt Secured by Vehicle	.00	.00	.00
All Other Secured	10,290.00	10,290.00	1,510.71
TOTAL SECURED:	15,760.29	15,760.29	1,510.71
Priority Unsecured Payments:			
Domestic Support Arrearage	.00	.00	.00
Domestic Support Ongoing	.00	.00	.00
All Other Priority		.00	.00
TOTAL PRIORITY:	.00	.00	.00
 GENERAL UNSECURED PAYMENTS: 	14,185.44	1,418.57	.00 • ========

<u>Disbursements:</u>	
Expenses of Administration Disbursements to Creditors	\$ 3,246.18 \$ 18,689.57
TOTAL DISBURSEMENTS:	\$ 21,935.75

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 04/13/2009 /s/ Tom Vaughn
Tom Vaughn, Chapter 13 Trustee

STATEMENT: This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R § 1320. 4(a)(2) applies.